REMARKS

No new matter is being presented. Reconsideration and allowance of the above-reference application is respectfully requested.

I. STATUS OF THE CLAIMS

Claims 1-21, 23 and 24 are pending.

Claims 1-6, 8, 12, 14, 15 and 17-21 have been amended.

Claims 23 and 24 have been added.

Claim 22 has been withdrawn from consideration.

No claims have been cancelled or allowed.

II. REJECTIONS UNDER 35 USC § 101

Claim 21 was rejected as lacking utility. Claim 21 has been amended in view of the Examiner's remarks. The MPEP, § 2106, states: "When functional descriptive material is recorded on some computer-readable medium it becomes structurally and functionally interrelated to the medium and will be statutory in most cases since use of technology permits the function of the descriptive material to be realized." Withdrawal of the § 101 rejection is respectfully requested.

III. REJECTIONS UNDER 35 USC §§ 102 and 103

In the Office Action, at pages 2-3, claims 1, 4-9, and 11-20 were rejected under 35 U.S.C. § 102 as anticipated by Myers. Claims 2, 3, and 10 were rejected as obvious in view of Myers. This rejection is traversed and reconsideration is requested.

Patentable Weight to Portions of Claims 1 and 20

On page 5, paragraph 3 of the Office Action, portions of claims 1 and 20 were given no patentable weight as containing "process" steps within an apparatus claim. These claims have been amended to clarify that components of the apparatuses of claims 1 and 20 are performing the actions of the "process". It is respectfully requested that these claims be fully examined, with all of their features taken into account.

Common Interface for Different User Roles

Claim 1 recites "a healthcare system, in use by users with different roles in an

organization", and "an integration interface commonly usable by the users acting in their different roles including modifications to the user interface application of said healthcare system". In other words, claim 1 recites users with different types of roles using a common interface to access patient data (see Fig. 4 of the present specification). In contrast, the workstations of Myers run software according to the role of the workstation ("workstations 18-22 are typically similar in terms of hardware, but differ in the software executed", col. 4, lines 5-7). For instance, analysis workstations run analysis software, and only the healthcare provider workstations 18 of Myers run the interface 24. In sum, with Myers, the form of interface used to access patient data depends on the purpose or role of the accessor (e.g. administration, analysis, etc.). With the invention of claim 1, all users, regardless of role, are capable of accessing the patient documents and records using the same interface software (i.e., the integration interface). Claim 24 extends this single-interface concept to interfacing with other kinds of health-care related systems.

Modification to Existing System

Claim 1 recites "a healthcare system, in use by users ... in an organization at a prior time", and "an integration interface including ... modifications to the user interface application ... the modifications enabling the user interface application to handle a request for access to a patient document ... and viewing of patient documents ... where the modifications are made after the prior time, and where the user interface application at the prior time could not automatically access the document management system". Myers does not teach modifications to the user interface application of a healthcare system (that is in-use), where the modifications themselves *enable* automatic access to a document management system not previously accessible with the user interface application. Rather, Myers teaches a new (not modified) system for providing a new type of Electronic Medical Record (EMR). Myers teaches that prior EMR systems were "problematic" (see col. 2, lines 18-36). Myers therefore calls for a new system that "provides significant advantages *over other medical record systems*" (col. 2, lines 51 and 52; see also col. 5, lines 44-53, further discussing inadequacies of other systems). Myers does not teach modifications to an in-use healthcare system providing authorization and access to patient records, but rather teaches an entirely new medical record system. The new system of Myers has a new interface (Figs. 2a and 2b), which is nowhere disclosed to have modifications or to have been, at some prior time before modification, unable to automatically access a document management system.

Separate Access

Claim 1 also recites that "the user authorization and access provided by the document

management system is separate from the user authorization and access provided by the healthcare system". The rejection of claim 1 alleged that the workstations of Myers correspond to the healthcare system of claim 1, and that the servers 10, 12, 14, 16 of Myers correspond to claim 1's document management system. In contrast to having two systems with separate authorization and access, the two systems (workstations and servers) of Myers work together to provide unitary, not separate, access to patient records ("The interface 24 [executed on the workstations] is *the gateway* through which the providers gain access to collections of individual patient medical records", col. 4, lines 18-21).

Claim 1 also recites "a healthcare system ... maintaining patient records and providing user authorization for access to the maintained patient records". At the top of page 3 of the March 29, 2001 Office Action, the rejection of claim 1 alleges that the workstations of Myers correspond to the healthcare system of claim 1 ("Myers et al. discloses a healthcare system defined by a set of workstations (Fig. 1, numerals 18,20,22) which provides access to patient records"). The healthcare system of claim 1 maintains the patient records. In Myers, the workstations (alleged healthcare systems) do not maintain patient records; that task is delegated to central controller 16/130, mainframe 144, and data repositories 138 and 140. This comports with the client-server configuration of Myers (col. 3, line 60); in client-server configurations, servers generally maintain records that are accessed by clients.

Independent Claims 1, 14, 15, and 17-21

Claims 14, 15, and 17-21 recite various of the features discussed above. Withdrawal of the rejection of claims 1, 14, 15, and 17-21 is respectfully requested.

Claim 2

Claim 2 has been amended to clarify that log-on information for logging on to the healthcare system is used to automatically log-on to the document management system. Myers does not discuss an *application* automatically logging a user onto another system based on a log-on to a first system. Furthermore, because Myers does not discuss separate systems, there is no motive that would lead one to modify Myers with such a log-on feature; one log-on is all Myers requires ("A Quit button 41 allows the provider to sign off of *the* system", col. 5, lines 26 and 27). Withdrawal of the rejection of claim 2 is respectfully requested.

IV. DEPENDENT CLAIMS

The dependent claims are deemed patentable due at least to their dependence from allowable independent claims. These claims are also patentable due to their recitation of independently distinguishing features. For example, claim 7 recites "said interface displays

patient documents and document information from said document management system". This feature is not taught or suggested by the prior art. Withdrawal of the rejection of the dependent claims is respectfully requested.

V. NEW CLAIMS

New claims 23 and 24 have been added to clarify an aspect of the present invention in which the user role may be a nurse, physician, or an administrator (claim 23), and where the interface application may provide access to various other systems (claim 24). These claims are at least supported in the specification by the paragraphs at: page 4, line 14; and page 8, line 10.

VI. CONCLUSION

There being no further outstanding objections or rejections, it is submitted that the application is in condition for allowance. An early action to that effect is courteously solicited.

Finally, if there are any formal matters remaining after this response, the Examiner is requested to telephone the undersigned to attend to these matters.

If there are any additional fees associated with filing of this Amendment, please charge the same to our Deposit Account No. 19-3935.

Respectfully submitted,

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VERSION WITH MARKINGS TO SHOW CHANGES MADE

IN THE CLAIMS:

Please AMEND and ADD to the claims as follows:

1. (ONCE AMENDED) A patient records and document access system, comprising:

a healthcare system, in use by users with different roles in an organization at a prior time, maintaining patient records and providing user authorization for access [limited] to the maintained patient records through a user interface application, where the patient records are accessed by the users with the user interface application;

a document management system separate from said healthcare system, maintaining patient documents and providing user authorization for access to the maintained patient documents, where the user authorization and access provided by the document management system is separate from the user authorization and access provided by the healthcare system; and

an integration interface commonly usable by the users acting in their different roles including modifications to the user interface application of said healthcare system [allowing], the modifications enabling the user interface application to handle a request for access to a patient document maintained by the document management system and viewing of patient documents, and [a process] the modified user interface application automatically accessing said document management system responsive to the request, obtaining the patient document, and providing the obtained patient document to the user interface application for viewing, where the modifications are made after the prior time, and where the user interface application at the prior time could not automatically access the document management system.

2. (ONCE AMENDED) An access system as recited in claim 1, wherein a user provides log-on information to log-on [logs-on] to the healthcare system using the user interface application and said integration interface automatically logs-on the user to the document management system using the log-on information from the user interface.

3. (ONCE AMENDED) An access system as recited in claim 1, wherein user authorization for access to the healthcare system is determined by the healthcare system and user authorization for access to the management system is determined by said integration interface application.

4. (TWICE AMENDED) An access system as recited in claim 1, wherein a user inputs document element deficiency information using the user interface application and said integration interface application controls the management system to perform deficiency updates responsive to the document element deficiency information.

5. (ONCE AMENDED) An access system as recited in claim 1, wherein said integration interface application records an audit event for an access to the document management system through the user interface application.

6. (TWICE AMENDED) An access system as recited in claim 1, wherein said integration interface application displays documents from said document management system.

7. An access system as recited in claim 1, wherein said interface displays patient documents and document information from said document management system.

8. (ONCE AMENDED) An access system as recited in claim 1, wherein said integration interface application comprises controls in the user interface and objects performing access to said document management system.

9. An access system as recited in claim 8, wherein said controls comprise a chart display control, a document display control and an image display control.

10. An access system as recited in claim 8, wherein said objects comprise a session manager object, a query object, a chart object and a document object.

11. (ONCE AMENDED) An access system as recited in claim 8, wherein said objects comprise a query object.

12. (ONCE AMENDED) An access system as recited in claim 1, wherein said user interface application includes a patient information control, a chart control, a chart view button, and a document viewer.

13. An access system as recited in claim 1, wherein a document comprises a chart.

14. (ONCE AMENDED) A patient records and document access system, comprising:

a healthcare system, in use by users with different roles in an organization at a prior time, maintaining patient records and providing user authorization for access [limited] to the maintained patient records through a user interface application, where the patient records are accessed by the users with the user interface application;

a document management system separate from said healthcare system, maintaining patient documents and providing an application programming interface separate from and used by said healthcare system to provide user authorization and access to the maintained patient documents, where the user authorization and access provided by the application programming interface is separate from the user authorization and access provided by the healthcare system; and

an integration interface commonly usable by the users acting in their different roles including modifications to the user interface application of said healthcare system [allowing] ,the modifications enabling the user interface application to handle a request for access to a patient document and viewing of patient documents, where the modifications are made after the prior time, and where the user interface application at the prior time could not automatically access the document management system.

15. (ONCE AMENDED) A patient records and document access system, comprising:

a healthcare system, in use by users with different roles in an organization at a prior time, maintaining patient records and including a document control added thereto and not originally available at a prior time in said healthcare system, where the patient records are accessed by the users with the document control;

a document management system separate from said healthcare system, maintaining patient documents and providing user access to the maintained patient documents responsive to a query, where the user authorization provided by the document management system is separate from the user access provided by the healthcare system; and

an integration interface commonly usable by the users acting in their different roles including objects responding to the document control and producing the query for the document management system, including modifications provided after the prior time, and where the document control at the prior time could not automatically access the document management system.

16. A system as recited in claim 15, wherein said healthcare system includes a

document viewer added thereto, said management system provides a document responsive to the query and said interface provides the document to the viewer.

17. (ONCE AMENDED) A method of accessing patient records stored in a healthcare system and documents stored in a document management system separate from the healthcare system, comprising:

using, by users acting in different roles in an organization, an interface control added to a user interface of the healthcare system to initiate and authorize access to the document management system; and

accessing, by the users acting in their different roles, the document management system using an access object not available in said healthcare system.

18. (ONCE AMENDED) A method of presenting documents in a healthcare system, comprising:

initiating access to a document management system separate from the healthcare system by users acting in different roles in an organization using a healthcare user interface; and

displaying, to the users acting in their different roles, a visual control in the healthcare system user interface for viewing documents from the management system.

19. (ONCE AMENDED) A patient records and document access system, comprising:

a healthcare system, in use by users with different roles in an organization, maintaining patient records and providing user authorization for access [limited] to the patient records through a user interface application, where the patient records are accessed by the users with the user interface application;

a non-integrated document management system, maintaining patient documents providing user authorization for access to the maintained patient documents, where the user authorization and access provided by the non-integrated document management system is separate from the user authorization and access provided by the healthcare system; and

an integration interface with said healthcare system commonly usable by the users acting in their different roles and obtaining data from said document management system through said integration interface.

20. (ONCE AMENDED) A patient records and document access system, comprising:

a healthcare system, in use by users with different roles in an organization at a prior time,

maintaining patient records and providing user authorization for access [limited] to the maintained patient records through a user interface application, where the patient records are accessed by the users with the user interface application;

a non-integrated document management system, maintaining patient documents and providing user authorization for access to the maintained patient documents, where the user authorization and access provided by the document management system is separate from the user authorization and access provided by the healthcare system; and

an integration interface commonly usable by the users acting in their different roles including modifications to the user interface application of said healthcare system [allowing], the modifications enabling the user interface application to handle a request for access to a patient document maintained by the document management system and viewing of patient documents and comprising controls in the user interface, said controls comprising a chart control, a document display control and an image display control, and said modified integration interface application automatically [including a process] accessing said document management system responsive to the request, obtaining the patient document, and providing the obtained patient document to the user interface application for viewing, said [process] modifications comprising objects performing access to said document management system and said objects comprising a session manager object, a query object, a chart object and a document object, with a user logging on to the healthcare system using the user interface application and said integration interface logging on to the management system using information from the user interface application, user authorization for access to the healthcare system being determined by the healthcare system and user authorization for access to the management system is determined by said integration interface, a user inputting document deficiency information using the user interface and said integration interface application controlling said management system to perform deficiency updates responsive to the deficiency information, and said integration interface recording an audit event for accesses to the document management system through the user interface application, where the modifications are made after the prior time, and where the user interface application at the prior time could not automatically access the document management system.

21. (ONCE AMENDED) A computer readable storage medium [having] storing code for executing a process controlling a computer by initiating access to a document management system in use by users with different roles in an organization and separate from the healthcare system using a healthcare user interface, and displaying, to the users acting in their different

roles, a visual control in the healthcare system user interface for viewing documents from the management system.

23. (NEW) The system according to claim 1, wherein the roles comprise at least two of nurse, physician, and administrator, and wherein the users use the modified user interface application as a common access mechanism to the health care system and the document management system.

24. (NEW) The system according to claim 23, wherein the user interface application further provides interface access to one of a billing system, a hospital information system, and a healthcare provider business office and collection system.